



Situation Report: Confirmed COVID-19		Location: The Gambia	
Date of Report: 7th & 9th October 2021		Investigation Start Date: 17th March 2020 as of 18hrs.	
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I. HIGHLIGHTS

This is the **386th** national situation report since the confirmation of the first case of the coronavirus disease (COVID-19) in The Gambia, on the **16th March 2020**

- No new COVID-19-related death registered, bringing the total to **339 (Crude Case-Fatality Ratio, 3.4%)**
- Two (2) new case was registered (**cumulative cases 9,943**)
- All the cases were registered on the 7th October (n=1) and 8th October (n=1)
- One (1) tested for reasons of traveling while the other due to suspicion of covid-19
- The test positivity rate is **0.25 (2/796), NPHL – 749 (1 positive) MRCG – 47 (1 Positives)**
 - **Two (2) cases are currently on oxygen therapy**
- Three (3) cases were newly discharged from the treatment centres, and zero (0) after at least **10 days** from the day they tested positive but evaded institutional isolation
- **No new contact** traced and monitored
- As of **9th October 2021**, the following number of people have been vaccinated with:
 - **Janssen & Janssen:**
 - Only 1 dose: 154,052
 - **Sinopharm:**
 - Dose 1: 4,457
 - Dose 2: 3,218
 - **AstraZeneca:**
 - Dose 1: 32,011
 - Dose 2: 21,337
- Of the total national target population (**≥ 18 years**):
 - **11.4%** are fully vaccinated (**2 doses of AZ/Sinopharm or 1 dose of J&J**)
 - **12.2%** received at least **one** COVID-19 vaccine dose (**AZ or J&J or Sinopharm**)

COVID-19 SITUATION IN NUMBERS

Globally

- 👤 Confirmed Cases: **238,835,754**
- 👤 Recoveries: **216,030,543**
- ➡ Deaths: **4,870,222**

Senegal

- 👤 Confirmed Cases: **73,841**
- 👤 Recoveries: **71,927**
- ➡ Deaths: **1,868**

The Gambia

- 👤 Confirmed Cases: **9,943**
- 👤 Active Cases: **7**
- 👤 Recoveries: **9,597**
- ➡ Deaths: **339**

II. EPIDEMIOLOGICAL DESCRIPTION

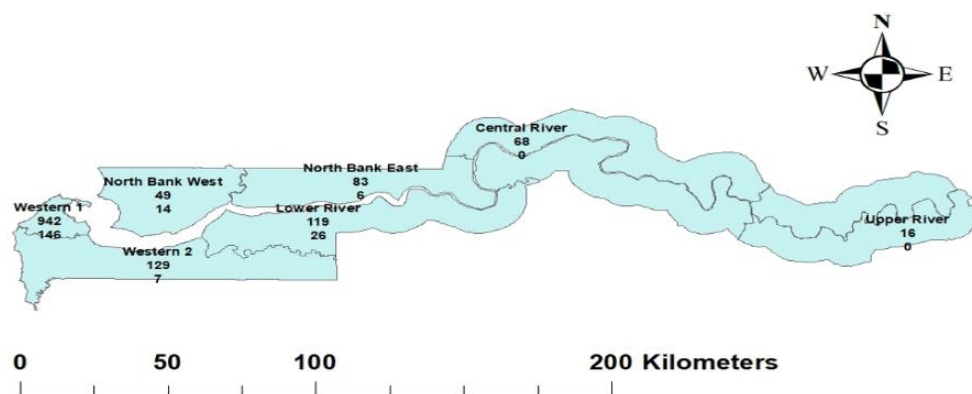


Fig 1: Geographic Distribution of COVID-19 cases per 100,000 Pop. by Region since the start of Pandemic to 31st August 2021 (Number Above) and the month of August 2021 (Number below) in The Gambia

- Western 1 Health Region has a disproportionately higher number of cases than all the health regions (**See Fig. 1**)
- Below are the age-sex distribution and the Epi-curve of confirmed cases by date of sample collection, respectively (**See Fig. 2 and 3**)

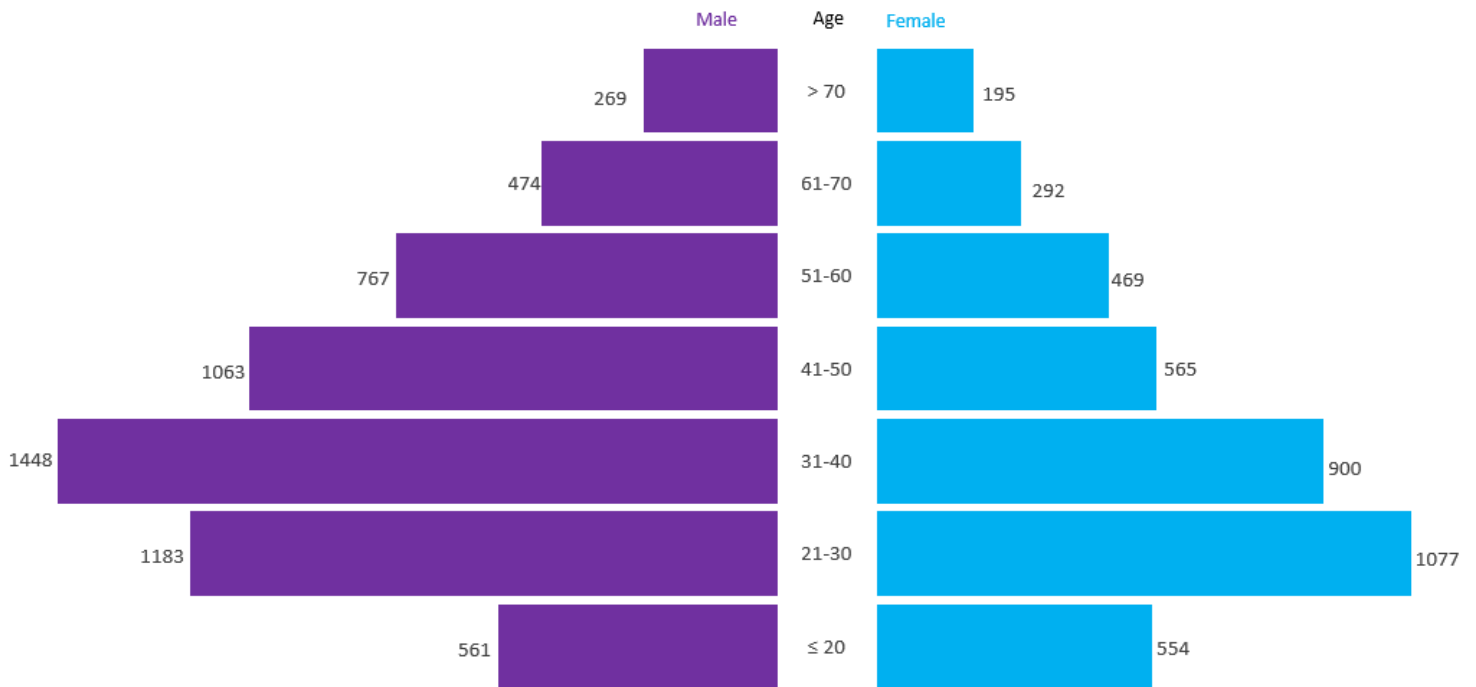


Fig 2: Age-Sex Distribution of Confirmed COVID-19 Cases, The Gambia, 2021

* This excludes the 27 confirmed cases whose demographic information are not yet available

About 59% of the confirmed cases are males (**See Fig. 2**)

About 59% of the confirmed cases are 40 years below (**See Fig. 2**)

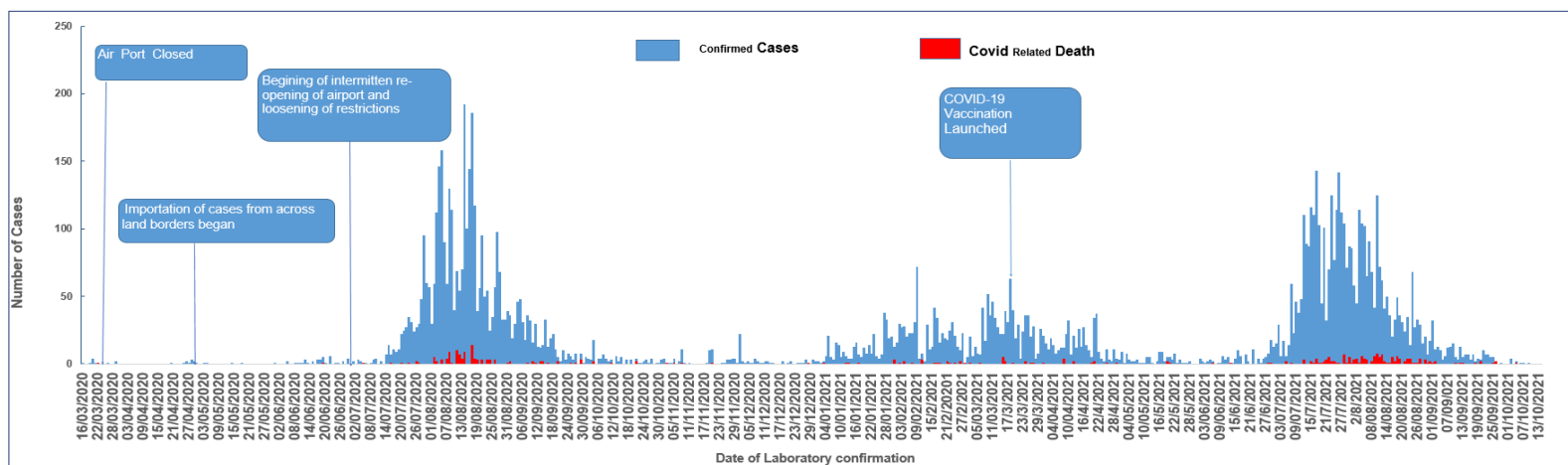


Fig. 3: Epidemic Curve of Laboratory-Confirmed Cases Reported daily, COVID-19 Pandemic, The Gambia, 16th March 2020-10th August 2021*.

A considerable amount of time elapsed between date of reporting and the date of laboratory confirmation of some cases

- Three main waves of infection occurred – the pre airport closure wave, the importation from Senegal wave and the intermittent airport re-opening and loosening of restrictions wave (See Fig.

Status	New	Cumulative
No. of active cases in institutional isolation		5
No. of COVID-19 patients on oxygen support		2
No. of patients recovered and discharged	0	
In Hotel Quarantine	0	19
Completed Hotel Quarantine	0	5,240
Completed follow-up (asymptomatic people with travel history to affected countries) *	0	310
No. of Contact(s) Identified**	0	
No. of Contacts being monitored	0	
No. of Contacts who completed 14-day follow-up	0	17,119
No. of Contacts lost to follow-up	0	58
Total Tests conducted (Repeat Tests)***	796(0)	114,099
Positive test result (Repeat Tests)***	2(0)	9,943
Negative test result (Repeat Tests)***	794(0)	102,901
Inconclusive test result (Repeat Tests)***	0(0)	

Table 2: Summary of New and Cumulative Public Health Response Outputs, COVID-19 Pandemic, The Gambia, 2021

* Follow-up completed prior to the 17th March (when the first confirmed case was reported)

** Includes both low-risk and high-risk contacts and not mutually exclusive with number quarantined (as some have been quarantined)

*** Includes repeat tests in bracket

III. MAJOR RESPONSE ACTIVITIES

Component	Interventions
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Coordination	<ul style="list-style-type: none"> • <i>Coordination meetings held at both central and regional levels</i>
Surveillance/ Laboratory	<ul style="list-style-type: none"> • <i>A total of 796 new laboratory test results received 47 from MRCG and 749 from NPHL</i> <ul style="list-style-type: none"> ○ <i>Of these, no test result returned inconclusive or indeterminate, 2 new samples tested positive</i>
Case Management / Psychosocial Support & Research / IPC	<ul style="list-style-type: none"> • <i>No new COVID-19 related death recorded</i> • <i>Three (3) patients were newly discharged from treatment centres</i> • <i>No new contact traced and monitored</i> • <i>Two(2) COVID-19 patients are currently on oxygen therapy</i>

Table 3: Major response activities undertaken newly, COVID-19 Outbreak, The Gambia, 2021

IV. GAPS/CHALLENGES:

- CBS activities not translating to increase in the number of daily tests being conducted
- Support for innovative countrywide risk communication strategies and activities on COVID-19 is suboptimal
- Dwindling compliance with mask-wearing requirements
- Low turn-out at COVID-19 sample collection sites resulting in fewer number of daily tests
- Denial, misinformation, stigma and discrimination against COVID-19 affected families.
- Low COVID-19 vaccination coverage rate

V. NEXT STEPS/RECOMMENDATIONS:

- CBS activities need to be synchronized with MRC's ILI surveillance to spur up testing rates in the hinterland.
- Intensify risk communication and community engagement activities, on COVID-19 at community level, including at LUMOS, in a bid to curtail community transmission and dispel misinformation and denial and vaccine hesitancy
- Strengthen community-based surveillance to increase awareness and testing rates
- Thorough enforcement of the mandatory mask-wearing regulation
- IPC measures should be strictly adhered to in all public and private health healthcare facilities
- Provision of adequate stocks of PPEs to all health facilities
- Health workers to observe all COVID-19 preventive measures always including the donning of appropriate PPEs
- Intensify activities geared to increase COVID-19 vaccination coverage at all levels

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